

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			09/02/99
FORMALITY REVIEW	S A	68966 4/28	1 - i - 1 - CC

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	5/1/99 5/1/99 5/1/99 5/1/99
1	5/1/99
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Claim	Date
Final	
Original	5/1/99 5/1/99
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Claim	Date
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If more than 150 claims or 10 actions  
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